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CONFIRMATION NO. 4650

SERIAL NUMBER 10/665,722	FILING OR 371(c) DATE 09/19/2003 RULE	CLASS 043	GROUP ART UNIT 1641	ATTORNEY DOCKET NO. NOVUS1170-1
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/412,664 09/20/2002 *VS*

** FOREIGN APPLICATIONS *****

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 12/10/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	CA	15	20	3
Verified and Acknowledged	<i>Allowance</i> <i>Examiner's Signature</i> <i>Initials</i>				

ADDRESS

28213

TITLE

Methods and devices for active bioassay

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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